

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

2014 FEB -5 AM 8:43
12FE4M5
FEC MAIL CENTER

NOTE CLIMATE US PAC

ADDRESS (number and street)

9219 Villa Drive

Check if different than previously reported. (ACC)

Bethesda

MD

20817-1

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

3. IS THIS REPORT

☒ NEW (N)

OR

☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☒ January 31 Year-End Report (YE)
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on

MM / DD / YYYY

in the State of

(d) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

10 / 01 / 2013

through

12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mark Dann

Signature of Treasurer



Date

01 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

MM / DD / YYYY

To:

MM / DD / YYYY

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

\$00

(b) Cash on Hand at
Beginning of Reporting Period.....

0.00

(c) Total Receipts (from Line 19).....

\$0000

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

7. Total Disbursements (from Line 31).....

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

\$0000

9. Debts and Obligations Owed TO
the Committee (itemize all on
Schedule C and/or Schedule D).....

0.00

10. Debts and Obligations Owed BY
the Committee (itemize all on
Schedule C and/or Schedule D).....

0.00



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Page 3

Page 4

COLUMN B
Calendar Year-to-Date

- [illegible]

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

800.00
0.00
800.00

800.00
0.00
800.00

14031180295

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:			PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial)
Karen Strickler

Mailing Address
9219 Villa Drive

City Bahesda, MD State MD Zip Code 20817

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

10 / 17 / 2013

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Pat Wilmsen

Mailing Address
542 Roops Mill Rd

City Westminster, MD State MD Zip Code 21157

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

12 / 17 / 2013

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

____ / ____ / ____

Amount of Each Receipt this Period

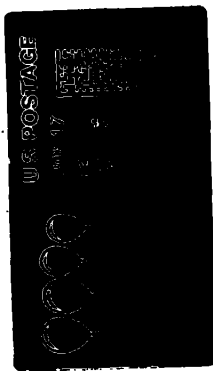
SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

800.00
800.00

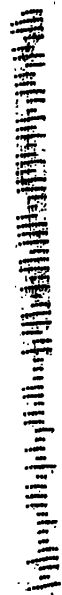
14031180297

VOTACIMATE U.S. PAC
2219 Villa Drive
Bethesda, MD 20817



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2014 FEB -5 AM 8:43
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Federal Election Commission
999 E Street, NW
Washington, DC 20463



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
---	------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
---	------------

<input type="checkbox"/> USPS Priority Mail Express	Postmarked
---	------------

<input checked="" type="checkbox"/> Postmark Illegible	
--	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
---	-------------------------------



PREPARER
(8/2013)



DATE PREPARED

14031180298